



#### **ISMPP Would Like to Thank...**

... the following Titanium and Platinum Corporate Sponsors for their ongoing support of the Society:





























#### **ISMPP Announcements**

- REGISTRATION NOW OPEN! 2018 European Meeting of ISMPP, Advancing Medical Publications in a Complex Evidence Ecosystem January 23-24 in London
- The ISMPP U Committee wants to hear from you!
   Groups or individual members can submit topic ideas via the ISMPP U proposal form located on the ISMPP U Committee page: <a href="http://www.ismpp.org/ismppu">http://www.ismpp.org/ismppu</a>





### For Your Best ISMPP U Experience...

To optimize your webinar experience today:

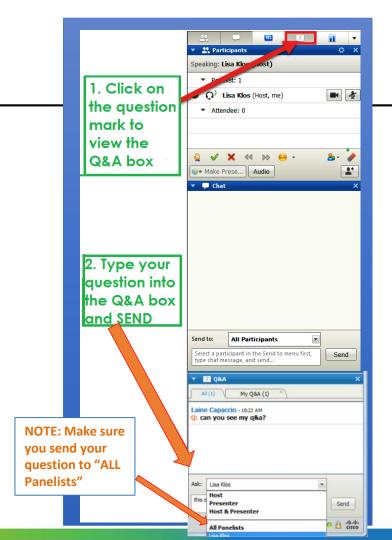
- Use a hardwired connection if available
- Use the fastest internet connection available to you
- If you are accessing the presentation over your computer, please be sure to increase the volume of your computer speakers





### **Questions**

- To ask a question, please type your query into the Q&A box
  - To ensure anonymity and that all panelists receive your question, please choose the drop down box option, "ALL Panelists" Otherwise, all audience members will be able to see your submitted question
- We will make every effort to respond to all questions







#### **Introductions**

FACULTY: Theodora (Theo) Bloom is executive editor of The BMJ (since 2014) and was European Coordinator for the 8th Peer Review Congress. At The BMJ her responsibilities include operations in print and online, as well as ethical and policy matters. She has worked in biomedical publishing since 1992, initially as an editor on the biology team at Nature, and then on the founding team of Current Biology. After a number of years helping to develop Current Biology and its siblings Structure and Chemistry & Biology, Theo joined the beginnings of the open access movement. As the founding editor of Genome Biology she was closely involved in the birth of the commercial open access publisher BioMed Central, where she remained for several years, ultimately as Editorial Director for Biology. After a spell as a freelance publishing consultant working with a variety of clients, including a medical communications agency, she joined the non-profit open access publisher Public Library of Science (PLOS) in 2008, first as chief editor of PLOS Biology and later as Biology Editorial Director with additional responsibility for PLOS Computational Biology and PLOS Genetics. She also took the lead for PLOS on issues around data access and availability. She chairs the scientific advisory board for EMBL-EBI Literature Services. Until recently she served on the boards of NAM Publications and the Dryad digital repository, and on the Genome Canada Data Sharing Policies Advisory Committee.

Theo has a bachelor's degree in Natural Sciences and a PhD in developmental cell biology from the University of Cambridge and worked as a postdoctoral fellow at Harvard Medical School, researching cell-cycle regulation, before moving into publishing.





#### **Introductions**

**FACULTY:** Jackie Marchington is Director of Global Operations at Caudex, a McCann Health Company. Jackie joined Caudex in 1990 as a medical editor/writer following a period of post-doctoral research. Since then, she has developed within the company in a range of roles culminating in her current position of Director of Global Operations. During her 25+ years in healthcare communications, she has used her logical approach to problem-solving and project development to evolve the current operating, quality and ethical standards for which Caudex is known.

She develops and delivers both internal and external training on all aspects of medical publications, including publication ethics, compliance and copyright, and works with all Caudex offices to ensure understanding of and adherence to quality control protocols, as well as processes that contribute to the smooth and efficient development of projects. Jackie became a CMPP in 2011, is an active ISMPP committee member (Advocacy and Outreach) and is a member of the Global Alliance of Publication Professionals (GAPP) team, a volunteer group who provide timely and credible responses to influential stories about medical publication professionals (eg, professional medical writers, publication planners).





#### **Introductions**

MODERATOR: Lisa Baker is a freelance medical writer. She was previously a Medical Director at inScience Communications, Springer Healthcare, and a Scientific Team Lead at Envision Pharma Group. Lisa's work has included publication development and strategic publication planning for varied clients and therapeutic areas. Lisa received her PhD in research psychology from McGill University. She is an ISMPP Certified Medical Publication Professional™ (CMPP) and is the current chair of the ISMPP U Committee.





### **Learning Objectives**

At the end of this presentation attendees should be able to:

- Have an increased awareness of the latest issues surrounding peer review and scientific publications
- Have a summary of the key takeaways from the Eighth International Congress on Peer Review and Scientific Publication
- Be familiar with the implications for publications professionals of the topics discussed at the Peer Review Congress





#### **Disclaimer**

Information presented reflects the personal knowledge and opinion of the presenters and does not necessarily represent the position of their current or past employers or the position of ISMPP







# **Theo Bloom**





#### **Declaration of interests**

- I am currently Executive Editor of *The BMJ*, published by BMJ, a wholly owned subsidiary of the British Medical Association
- The BMJ is co-organizer of the Peer Review Congress, and I was European Coordinator this year.
  - I previously worked for PLOS, 2008-2014
  - Current voluntary role: EBI/Literature
     Services/EuropePMC Advisory Board
  - I'm solely responsible for today's content





# What I'll talk about today

- From the perspective of a journal editor
- Some work from colleagues and former colleagues
- Most credit to Hilda Bastian, and the twitterati



http://blogs.plos.org/absolutely-maybe





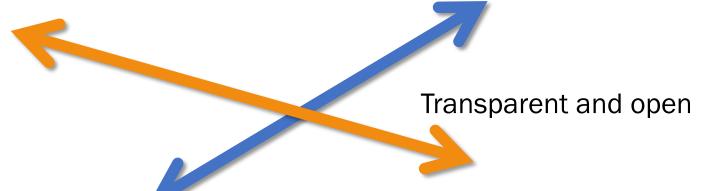


# **Key disagreements at the Congress**

Should publication be ...?

Single- double- or triple-blind

Rapid / immediate



Slow and careful





# Biases in reporting and in peer review

What types of bias?





### **Bias #1: Gender**



Jory Lerback and Brooks Hansen. American Geophysical Union





# Bias #2: Spin

Definition	n = 35	Exar
Reporting practices that distort the interpretation of results and create misleading conclusions, suggesting a more favourable result	20 (57%)	"Spe expe differ nons "We spin the n expla
Discordance between results and their interpretation, with the interpretation more favourable than the results	9 (26%)	conc
Attribution of causality when study design does not support it	3 (9%)	'Inap one t [15]
Overinterpretation or inappropriate extrapolation of results	3 (9%)	'We that

https://doi.org/10.1371/journal.pbio.2002173.t002





To be avoided when writing papers: common types of problematic spin in scientific publications as studied by Quinn Grundy et al. #PRC8

#### Practices used to spin results

- Inappropriate claims given study design
- Inappropriate recommendations for practice
- Selective reporting within the text
- Results presented more favourably than warranted

Chiu K, Grundy Q, Bero L (2017) 'Spin' in published biomedical literature: A methodological systematic review. PLoS Biol15(9): e2002173. https://doi.org/10.1371/journal.pbio.2002173





#### Bias #3: Interim results



Be aware of interim results of randomized trials, says Steven Woloshin #PRC8

#### Summary

Many interim publications report analyses that are not pre-specified or lack a compelling justification.

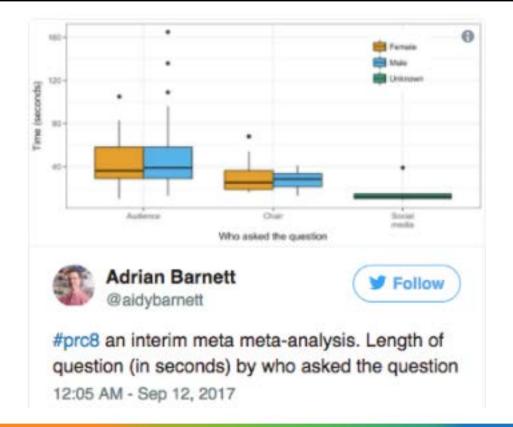
Frequent nonpublication may cause bias since final treatment effects remain unknown.

Interim and final publications have similar journal and media prominence but conclusions may change.





### **Bias #3: Interim results**







# Fixing peer review

Blinding versus anonymity





# Fixing peer review #1 - double-blind





Who chooses double-blind peer review at @nature journals? @elisader et al took a look #PRC8 pllqt.it/FyVKNO

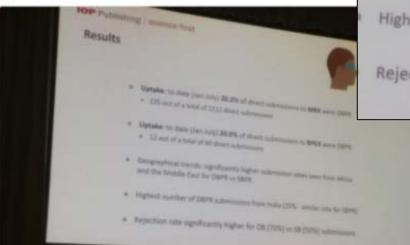
Conclusions Authors choose double-blind review more frequently when they submit to more prestigious journals, when they are affiliated with less prestigious institutions, or when they are from specific countries. The double-blind option is also linked to less successful editorial outcomes.



# Fixing peer review #2 - double-blind



Harris shares @IOPPublishing survey #Author preference for Double blind v Single blind #peerreview #PRC8 #peerrevwk17



Uptake: to date (Jan-July) 20.0% of direct submissions to BPEX were DBPR

12 out of a total of 60 direct submissions

Geographical trends: significantly higher submission rates seen from Africa

Highest number of DBPR submissions from India (25% - similar rate for SBPR)

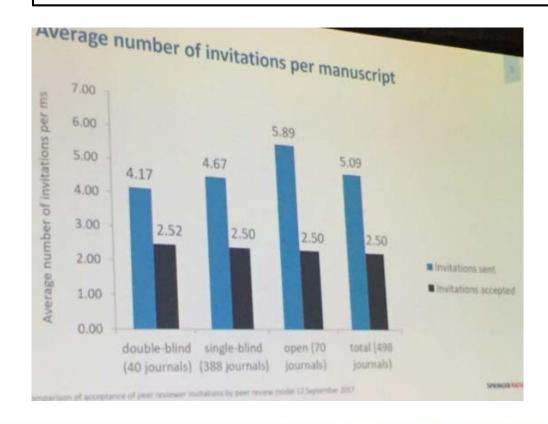
Rejection rate significantly higher for DB (70%) vs SB (50%) submissions



Simon Harris, IOP Publishing

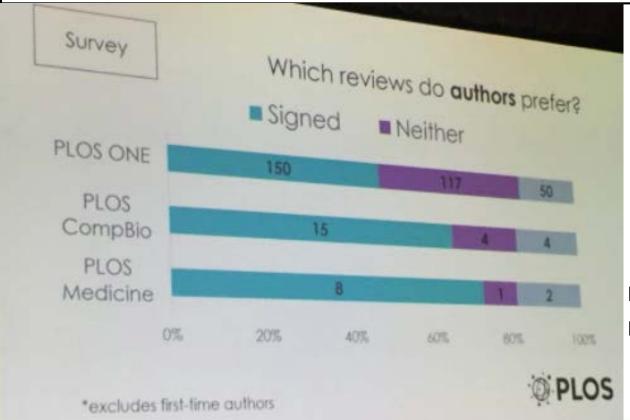


# Fixing peer review #3 – signed reviews





# Fixing peer review #4 – signed reviews<sup>2</sup>



Elizabeth Seiver, Helen Atkins PLOS





## Fixing peer review #5



#### Hilda Bastian

http://blogs.plos.org/absolutely-maybe/2015/05/13/weighing-up-anonymity-andopenness-in-publication-peer-review/





# **Fixing reporting**

**Checklists** 





# Improving reporting #1 - checklists

A core set of reporting standards for rigorous study design

#### Randomization

- Animals should be assigned randomly to the various experimental groups, and the method of randomization reported.
- · Data should be collected and processed randomly or appropriately blocked.

#### Blinding

- Allocation concealment: the investigator should be unaware of the group to which the next animal taken from a cage will be allocated.
- Blinded conduct of the experiment: animal caretakers and investigators conducting the
  experiments should be blinded to the allocation sequence.
- Blinded assessment of outcome: investigators assessing, measuring or quantifying experimental outcomes should be blinded to the intervention.

#### Sample-size estimation

- An appropriate sample size should be computed when the study is being designed and the statistical method of computation reported.
- Statistical methods that take into account multiple evaluations of the data should be used when an interim evaluation is carried out.

#### Data handling

- · Rules for stopping data collection should be defined in advance.
- · Criteria for inclusion and exclusion of data should be established prospectively.
- How outliers will be defined and handled should be decided when the experiment is being designed, and any data removed before analysis should be reported.
- The primary end point should be prospectively selected. If multiple end points are to be assessed, then appropriate statistical corrections should be applied.
- · Investigators should report on data missing because of attrition or exclusion.
- · Pseudo replicate issues need to be considered during study design and analysis.
- Investigators should report how often a particular experiment was performed and whether results
  were substantiated by repetition under a range of conditions.

Malcolm Macleod

Landis et al. Nature 490, 187-191

doi:10.1038/nature11556





# Improving reporting #1 - checklists

Findings of a retrospective, controlled cohort study of the impact of a change in Nature journals' editorial policy for life sciences research on the completeness of reporting study design and execution

Malcolm Robert Macleod, The NPQIP Collaborative group doi: https://doi.org/10.1101/187245

This article is a progrint and has not been pass-recovered [what does this mass/]

Abstract

Info/History Mi

ics Supplementary material

Preview PDF

#### Abstract

Objective: To determine whether a change in editorial policy, including the implementation of a checklist, has been associated with improved reporting of measures which might reduce the risk of bias. Methods: The study protocol has been published at DOI: 10.1007/s11192-016-1964-8. Design: Observational cohort study. Population: Articles describing research in the life sciences published in Nature journals, submitted after May 1st 2013. Intervention: Mandatory completion of a checklist at the point of manuscript revision. Comparators: (1) Articles describing research in the life sciences published in Nature journals, submitted before May 2013; (2) Similar articles in other journals matched for date and topic. Primary Outcome:

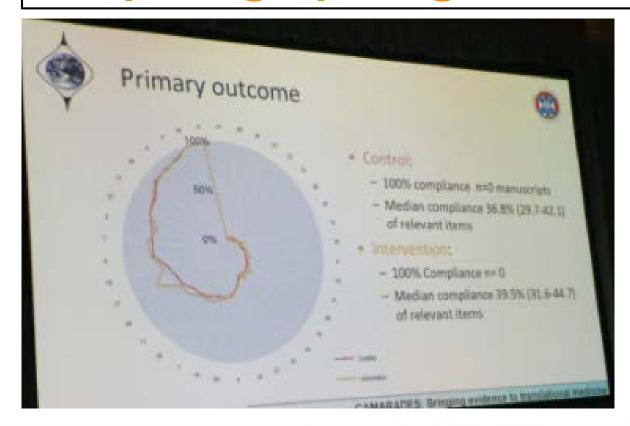








# Improving reporting #2 - checklists<sup>2</sup>



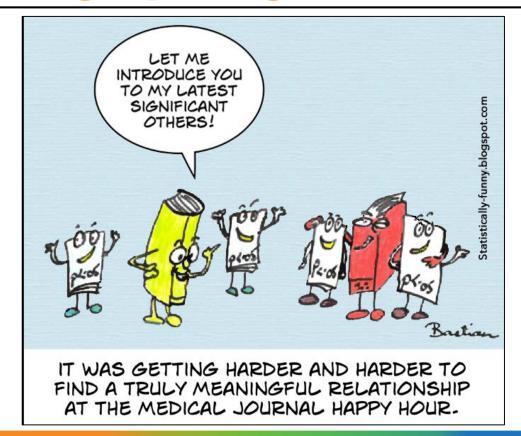
Emily Sena,

Edinburgh





# **Improving reporting #3**







# Improving reporting #4 - speeding up





Coming ...preprint server for medicine.
Accelerate research, complement peer
review, encourage sharing. @MedArXiv
@YODAProject w/@OSFramework







### Reasons to be cheerful?

Should we be optimistic or pessimistic?





#### Pessimism #1

"There seems to be no study too fragmented, no hypothesis too trivial, no literature citation too biased or too egotistical, no design too warped, no methodology too bungled, no presentation of results too inaccurate, too obscure, and too contradictory, no analysis too self-serving, no argument too circular, no conclusions too trifling or too unjustified, and no grammar and syntax too offensive for a paper to end up in print"

Drummond Rennie,
quoted by David Moher





#### Pessimism #2

Special Communications

# Statistical Evaluation of Medical Journal Manuscripts

Stanley Schor, PhD, and Irving Karten, MA

Contributors of scientific communications to medical journals are responsible for the research designs of their studies, the applicability of the statistical tests used, and the validity of the to differences in the numbers of articles evaluated in each journal.

Each communication was subjected to an abherviated but intensive critical reading by a comSteve Goodman,

JAMA. 1966 Mar

28;195(13):1123-8.



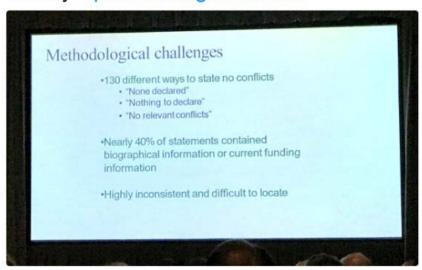


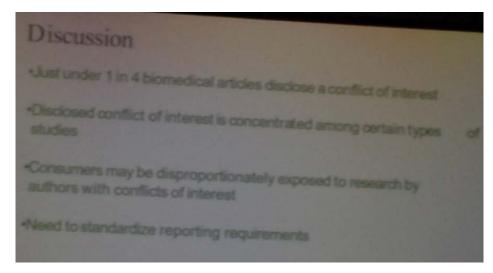
# Some Optimism? - COI declarations





..Considerable methodological challenges to studying author conflict of interest Quinn Grundy @peerrevcongress #Prc8

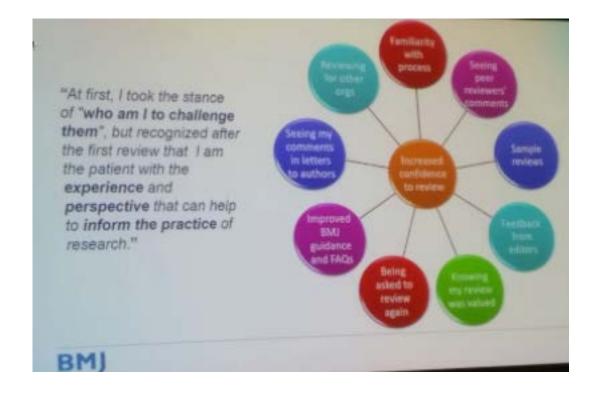








### **Optimism #2 – patient involvement**







### Optimism #3 – patient involvement

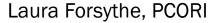




Fascinating approach to peer review of @PCORI grants involving patients/carers/advocates, stakeholders (eg insurers) AND scientists #PRC8



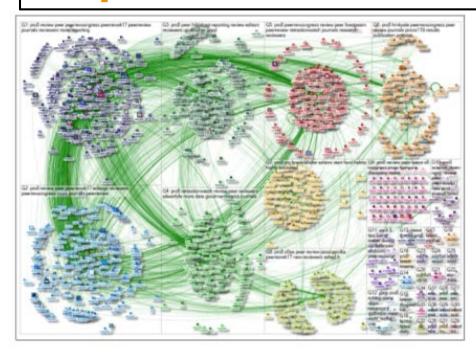








### Optimism #4 -network of research



#### #prc8 Twitter NodeXL SNA Map and Report for Sunday, 10 September 2017 at...

The graph represents a network of 411 Twitter users whose recent tweets contained "#prc8", or who were replied to or mentioned in those tweets, taken from a data set

#### **Graham Mackenzie**

@gmacscotland Follows you





### Optimism #5 - humour



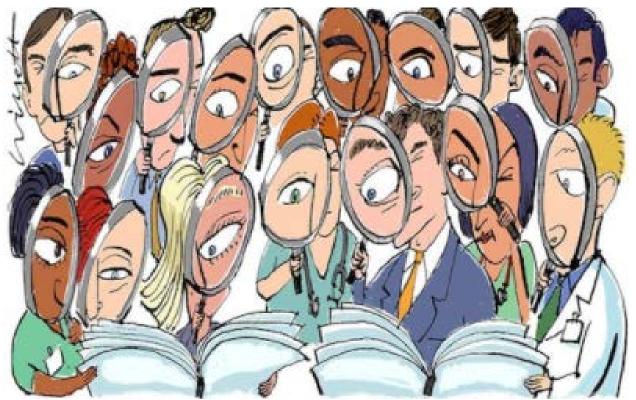
"The difference between medical research and agricultural research is that medical research is done by doctors but agricultural research is not done by farmers."

Attributed to M. Healy in D. Altman, SIM, 1998





### **Thanks for listening!**



@TheoBloom

@bmj\_latest





### **Jackie Marchington**





### **Disclosures**

- The opinions expressed in this webinar are mine, and do not necessarily reflect those of my employer
- My employer paid for my registration and subsistence costs to attend the peer review congress, mainly to stop my unseemly pleading





### As a newbie...

- Similar size and feel to ISMPP EU meeting
- Not the usual publishers (companies) we meet at ISMPP
- Small exhibition, 16 exhibitors
  - Data/analytics
  - Workflow/back office
  - Peer review management
  - Editorial services
  - EQUATOR





### **Connected**

- All non-keynotes research based
- Live streamed on Facebook
- Active Twitter participation
  - Questions via Twitter
- Queues at the microphones
- Simultaneous publications
- Ran pretty much to time







# Bias associated with conflict of interest and peer review

Focusing on industry (me, not the agenda!)





### **Introductory keynote**

- COIs
  - information overload
- Bias
  - Methods/research questions
  - Unpublished studies/ selective reporting
  - Analysis
  - Interpretation "spin"



Jackie Marchington @blazingocelots · Sep 10
The two biggest unresolved problems in the literature are

bias and spin according to Lisa Bero at #PRC8

View Tweet activity



Jackie Marchington @blazingocelots · Sep 10
Disclosure of financial ties is insufficient to describe conflicts of interest. Often, it's just too much information

View Tweet activity

#prc8



Jackie Marchington @blazingocelots · Sep 10

Lisa Bero is kicking off **#prc8** talking about bias in the research. Research design, reporting, interpretation and analysis are all culprits





### **Stopping spin**

- Checklist for peer reviewers
- Peer review methods and results (including supp info)



- Eliminate author discussion section
- Post-publication discussion
  - Multiple discussions
  - Megaphone effect (social media)





### **Conflict of interest statements**

#### COIs are confusing

- 130 different ways of stating no conflicts of interest!
- Conclusion: Conflict of interest statements should be standardized
  - No mention of ICMJE form.
  - No mention of CONVEY global disclosure system







### Industry bias in systematic reviews

### Systematic reviews with industry funded authors are biased

- Study of studies about systematic review bias
  - Methodological quality similar
  - Statistically favourable results frequency similar
  - Financial COI = more favourable conclusions

 Unclear whether funding impacts results of systematic reviews





### Study registration: missing studies

### Do missing trials affect the conclusions of systematic reviews?

- Including additional trials found only on CT.gov made no difference to the strength of evidence or conclusions of systematic reviews in 5 clinical areas
- Suggested reasons for this include:
  - few of the additional studies included results
  - outcomes were mismatched between registry and paper





### **Interim results**

- Of 171 papers reporting interim results, only 40% were prespecified
- For studies >1 year past completion date (158/171)
  - only 57% were fully (finally) reported
  - 85% of abstract conclusions did not change
- Journals should only report
   prespecified interim data sets and
   commit to publishing full results on
   trial completion



Jackie Marchington @blazingocelots · Sep 10

Would journals be willing to link interim to final papers if the final paper was published in another journal? #PRC8

View Tweet activity



Jackie Marchington @blazingocelots · Sep 10

Of 171 papers of interim results, only 40% were specified in the protocol. 72 paper pairs with interim and final results were found #PRC8





### Spin

- Study of "spin" studies...
  - Studies more prevalent in trials
  - Spin more prevalent in trials
  - Spin not associated with industry funding



Jackie Marchington @blazingocelots · Sep 10
Interesting that the questioner assumes the finding of the lack of industry funding bias is a negative result. #PRC8





Jackie Marchington @blazingocelots · Sep 10

Results of this meta-analysis show "Industry sponsored studies are no more likely to have spin than non-industry sponsored studies" #PRC8

View Tweet activity



Jackie Marchington @blazingocelots - Sep 10
Four main categories of "spin": inappropriate claims, inappropriate recommendations, selective reporting, overextrapolation #PRC8

View Tweet activity

**Design:** "We had sufficient data to[...] analyse the association of industry sponsorship[...] with spin" **Results:** "However, the meta-analysis found no significant association, possibly owing to the heterogeneity of the 7 included articles"





### Data sharing: academia

- Survey of clinical trial authors
- About half had a plan and about a third had received requests
- Happy for inclusion in meta analyses, less so for replication
- 3–125 hours to prepare data set



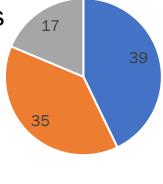




## YODA (Yale University Open Data Access) update

- 73 research proposals from 159 trials
- 89% approved, 3% under review, 8% did not proceed
  - Confidentiality
  - Non-availability of specific data elements
  - Proposal not clear





- Secondary research
- Meta analysis
- Validation studies





# Improving peer review and scientific publication

Registration and reporting

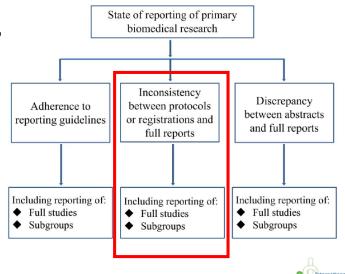




### **Quality of reporting**

- COMPARE-style study
- 200 RCT publications
  - Few discrepancies in study design, type or interventions
  - Middling discrepancies in study arms and primary outcome reporting
  - Often discrepancies in start/finish dates, study sponsor, 2° outcomes and data monitoring committees

Li G, et al. BMJ Open 2017;7:e014749. doi:10.1136/bmjopen-2016-014749





### **Quality of reporting (cont)**



 Non-industry funding associated with lower quality reporting



- had a peer review challenge specifically on a checklist item?
  - Yes
  - No
  - N/A (not part of my role)



Jackie Marchington @blazingocelots · Sep 11
I can't ever remember a jnl query about a reporting checklist when they've been required in the submission package. Does anyone look? #PRC8

View Tweet activity



Jackie Marchington @blazingocelots · Sep 11

Questioner suggests better industry reporting is an artefact of more attentive editor/peer review. That would be an interesting study #PRC8

View Tweet activity



Jackie Marchington @blazingocelots · Sep 11

Non-industry funding associated with lower quality reporting. Spkr speculates could be related to better trained personnel in industry #PRC8

View Tweet activity



Jackie Marchington @blazingocelots - Sep 11

Daisy Kosa talking about concordance between trial registry entries and publications. What study characteristics influence rep quality #PRC8





### **Optimism bias**

- Overestimation of treatment effect sizes (2007 17)
  - Proposed effect size ~25% greater than observed
  - Trials with a statistically significant effect proposed less optimistic effect sizes



Jackie Marchington @blazingocelots - Sep 11
Optimism bias - only 9.4% of trials had an effect size similar to that hypothesised in the study protocol (2007-17) #PRC8

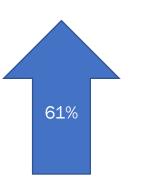
- Compared with 1955–2006, optimism bias has reduced
- Nearly 80% included no rationale for the proposed effect size
- Does failure to establish statistical significance mean we are missing out on incremental clinical improvements?



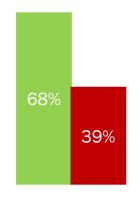


### **Registration and reporting**

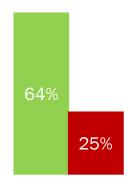
 Finnish ethics review board study, trial protocols approved in 2002 and 2007



Increase in registration over time



Registered trials more likely to be published



...and with the same primary outcomes



Jackie Marchington @blazingocelots · Sep 11

This study looked at trials approved in Finland in 2002 and 2007. Would love to see 2012 and 2017 to see what changes are happening #PRC8

View Tweet activity



Jackie Marchington @blazingocelots · Sep 11

Trial registration is associated with better reporting of trial outcomes #PRC8





### **How about industry?**

Chan A, Pello A, Kitchen J, Axentiev A, Virtanen JI, Liu A, Hemminki E. Association of Trial Registration With Reporting of Primary Outcomes in Protocols and Publications. *JAMA*. Published online September 11, 2017. doi:10.1001/jama.2017.13001

Table 1. Study Characteristics Associated With Prospective Registration, Publication, and Publication Without Discrepant Primary Outcomes

	Clinical Trials, No. (N = 113)	Registered		Published <sup>a</sup>		Published Without Discrepant Primary Outcomes <sup>b</sup>	
Trial Characteristic		No. (%) <sup>c</sup>	AOR (95% CI)d	No. (%) <sup>c</sup>	AOR (95% CI) <sup>d</sup>	No. (%) <sup>c</sup>	AOR (95% CI) <sup>d</sup>
Sponsor							
Industry	53	46 (87)	1.97 (0.50-7.81)	36 (68)	1.23 (0.42-3.61)	33 (62)	1.35 (0.47-3.89)
Non-industry	60	23 (38)	1 [Reference]	28 (47)	1 [Reference]	22 (37)	1 [Reference]



Jackie Marchington @blazingocelots - Sep 11

Wow, post FDAAA shows 100% registration, 100% results reporting and 98% publication rate #PRC8 for neuropsychiatric medications

View Tweet activity

Trial registration is good for results disclosure





### A reduction in zombies...



- December 1, 2014, of 329 trials
  - 109 (33%) had results posted on ClinicalTrials.gov only,
  - 42 (13%) available from PubMed only
  - 81 (25%) available from both
  - 97 (29%) in neither



71% of trials have results disclosed





### **Thank You**





### Questions

- To ask a question, please type your query into the Q&A box
- To ensure anonymity, before sending please choose the drop-down box option, "Hosts, Presenters and Panelists." Otherwise, ALL audience members will be able to see your submitted question





### **Upcoming ISMPP U's**

- November 29, 2017
- Topic: Challenges with Review Articles





### **Thank You for Attending!**

• We hope you enjoyed today's presentation. Please check your email for a link to a survey that should take only a few minutes to complete. We depend on your feedback and take your comments into account as we develop future educational offerings. Thank you in advance for your participation!





# **ISMPP**University

2017 webinar series October 25, 2017

